| (Re | equestor's Name) | | | | |
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| (Ac | ldress) | | | | |
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| PICK-UP | ☐ WAIT | MAIL | | | |
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| (Bu | siness Entity Nam | e) | | | |
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| Certified Copies | Certificates | of Status | | | |
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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only

G. MCLEOD

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EXAMINER



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COVER LETTER

| _ | stration Section sion of Corporations | | |
|---|---|--------------------|---|
| SUBJECT: | Premier Image Studios, I | | npany) |
| The enclosed filing. | | · | nation and fee(s) are submitted for |
| Please return | all correspondence concerning thi | is matter to: | |
| Glenn He | eino | | _ |
| | (Contact Person) | | |
| Premier I | mage Studios, LLC | | |
| | (Firm/Company) | | - |
| 461 NE 2 | 5 Ter | | |
| | (Address) | | _ |
| Boca Rat | on, FL 33431 | | |
| | (City/State and Zip Code) | | _ |
| For further in | nformation concerning this matter, | please call: | |
| Glenn He | eino a | _{t (} 561 | 866-9670 |
| (N | ame of Contact Person) | (Area Code | & Daytime Telephone Number) |
| Enclosed ple | ease find a check made payable to t \$25 Filing Fee | | Department of State for: 555 Filing Fee & Certified Copy |
| Registration Division of C Clifton Build 2661 Execut | Corporations | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

| | limited liability company as mier Image Studios, | | s of the Florida I | Department |
|---|---|-----------------------------|--------------------|---|
| 2. This limited liab Florida | ility company was organized | under the laws of: | | |
| 3. The Florida docu <u>L06000059</u> | ument/registration number of | `this limited liability con | npany is: | · |
| 4 r Becky S. Anderson | | , hereby resign as a | MGRM | |
| 4. I, Becky S. Anderson (Print Name of Person Resigning) | | , nereby resign as a | (Print Title | <u>'(e)</u> |
| resignation in wr | bility company and affirm the iting. S. Andwow. gning Member, Managing M | | ny has been noti | .fied of my |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | | FILED SECRETARY OF SIMPLETON OF CORPORA |